# DIVISION OF OCCUPATIONAL HEALTH AND SAFETY

# OFFICE SAFETY CHECKLIST

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Institute:** |  | **Facility:** |  | **Survey Date:** |  |
| **Building/Rooms covered on this checklist:** |  |
| During the survey of the designated area, complete the checklist below. Check N/A if the item does not apply. |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **BASIC LIFE SAFETY** | **YES** | **NO** | **N/A** | **COMMENTS** | **CORRECTIVE ACTION TAKEN** | **CORRECTION COMPLETED** |
| 1. Are exit signs illuminated and visible?
 |  |  |  |  |  |  |
| 1. Are corridors and exits free from obstructions and unlocked?
 |  |  |  |  |  |  |
| 1. Access to exit doesn’t require travel through high hazard area?
 |  |  |  |  |  |  |
| 1. Stairways are in good repair with handrails and non-slip tread?
 |  |  |  |  |  |  |
| 1. Stairways are not being used for storage?
 |  |  |  |  |  |  |
| 1. Stairway steps are uniform in size?
 |  |  |  |  |  |  |
| 1. Is the Emergency Evacuation Route & Action Plan posted?
 |  |  |  |  |  |  |
| 1. Are exit doors closed and not propped open?
 |  |  |  |  |  |  |
| 1. Is there no obvious damage to sprinklers?
 |  |  |  |  |  |  |
| 1. Are fire extinguishers easily accessible, checked monthly, and operational?
 |  |  |  |  |  |  |
| 1. Are fire extinguishers mounted so that the travel distance from employees to any extinguisher is 75 feet or less?
 |  |  |  |  |  |  |
| **GENERAL OFFICE SAFETY** | **YES** | **NO** | **N/A** | **COMMENTS** | **CORRECTIVE ACTION TAKEN** | **CORRECTION COMPLETED** |
| 1. Are aisles, doorways and corners free of obstructions to permit visibility and movement?
 |  |  |  |  |  |  |
| 1. Lighting in work areas and walkways adequate?
 |  |  |  |  |  |  |
| 1. Are chairs in safe condition and are caster, rungs and legs sturdy?
 |  |  |  |  |  |  |
| 1. Are all equipment and supplies in their proper places?
 |  |  |  |  |  |  |
| 1. Is there adequate walking and egress clearance?
2. 44” for corridors and stairways.
3. 36” for aisles.
4. 32” for doors.
 |  |  |  |  |  |  |
| 1. Are carts, dollies, etc. available for use in transporting heavy objects and boxes?
 |  |  |  |  |  |  |
| 1. Is housekeeping being adequately maintained?
 |  |  |  |  |  |  |
| 1. Are MSDS available for office and housekeeping chemicals?
 |  |  |  |  |  |  |
| 1. Are OSHA posters prominently displayed?
 |  |  |  |  |  |  |
| **TRIP/FALL HAZARDS** | **YES** | **NO** | **N/A** | **COMMENTS** | **CORRECTIVE ACTION TAKEN** | **CORRECTION COMPLETED** |
| 1. Is the floor surface level and undamaged?
 |  |  |  |  |  |  |
| 1. The floor is not wet or slippery?
2. A warning sign is available in case of spills?
3. Cleanup supplies are readily available?
4. Non-slip mats are in entryways if needed?
 |  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **TRIP/FALL HAZARDS (continued)** | **YES** | **NO** | **N/A** | **COMMENTS** | **CORRECTIVE ACTION TAKEN** | **CORRECTION COMPLETED** |
| 1. Are carpeted areas clean, carpets secured to floor and free of worn or frayed seams?
 |  |  |  |  |  |  |
| 1. Is any equipment or supplies protruding into walkways?
 |  |  |  |  |  |  |
| 1. Are there cords or cables causing a trip hazard?
 |  |  |  |  |  |  |
| 1. Are permanent use cords covered by runners when crossing walkways?
 |  |  |  |  |  |  |
| 1. Is a step stool or ladder available to minimize the use of chairs for reaching high objects?
 |  |  |  |  |  |  |
| **ELECTRICAL** | **YES** | **NO** | **N/A** | **COMMENTS** | **CORRECTIVE ACTION TAKEN** | **CORRECTION COMPLETED** |
| 1. Are GFCI outlets within 6 feet of a water source?
 |  |  |  |  |  |  |
| 1. Is access to electrical panels or electrical room unobstruction (at least 36”)?
 |  |  |  |  |  |  |
| 1. Are outlets overloaded?
 |  |  |  |  |  |  |
| 1. Extension cords are not used in lieu of fixed wiring?
 |  |  |  |  |  |  |
| 1. A maximum of one power strip per electrical receptacle is used? (no daisy chains)
 |  |  |  |  |  |  |
| 1. Electrical cords and plugs are in good condition? (i.e., not frayed, taped, spliced, or missing ground prongs)
 |  |  |  |  |  |  |
| 1. Electrical receptacles are in good working condition?
 |  |  |  |  |  |  |
| 1. All electrical equipment in good working condition?
 |  |  |  |  |  |  |
| 1. Are electrical closets free of storage?
 |  |  |  |  |  |  |
| **ELECTRICAL (continued)** | **YES** | **NO** | **N/A** | **COMMENTS** | **CORRECTIVE ACTION TAKEN** | **CORRECTION COMPLETED** |
| 1. Are personal appliances such as space heaters or coffee makers compliant with the buildings electrical circuit system?
 |  |  |  |  |  |  |
| 1. Are space heaters equipped with a multi-directional tip-over switch?
 |  |  |  |  |  |  |
| 1. Are space heaters equipped with an overheat sensor?

  |  |  |  |  |  |  |
| **MAINTENANCE (outside and inside)** | **YES** | **NO** | **N/A** | **COMMENTS** | **CORRECTIVE ACTION TAKEN** | **CORRECTION COMPLETED** |
| 1. Are doors and locks in good working order?
 |  |  |  |  |  |  |
| 1. Are ceiling tiles intact, undamaged and in place?
 |  |  |  |  |  |  |
| 1. Are there no signs of weather damage or mold growth in the facility?
 |  |  |  |  |  |  |
| 1. Are all windows unbroken and free from any type of damage?
 |  |  |  |  |  |  |
| 1. Do air conditioning vents and ducts appear to be clean upon visual inspection?
 |  |  |  |  |  |  |
| 1. Are outside lights in good working order?
 |  |  |  |  |  |  |
| 1. Does the exterior of the building present no safety concern?
 |  |  |  |  |  |  |
| 1. Is the parking lot area free of any safety concern? (i.e. overgrown landscaping, uneven pavement, traffic hazards)
 |  |  |  |  |  |  |

Additional comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_